

10/12/01

UTILITY
PATENT APPLICATION
TRANSMITTAL

For new nonprovisional applications under 37 CFR 1.53(b)

USPTO

PTO

Attorney Docket No.	214727US6
First Inventor or Application Identifier	Hidekazu KA[REDACTED] et al.
Title	RECORDING/REPRODUCING APPARATUS, AND METHOD OF DETECTING STATE THEREOF
Assignee Name: SONY CORPORATION	
Assignee Address: 7-35, Kitashinagawa 6-chome, Shinagawa-ku, Tokyo 141-0001 Japan	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17). (Submit an original and a duplicate for fee processing)		
2. <input checked="" type="checkbox"/> Specification	Total Sheets	51
3. <input checked="" type="checkbox"/> Formal Drawing(s) (35 U.S.C. 113)	Total Sheets	15
4. <input type="checkbox"/> Oath or Declaration	Total Pages	
a. <input type="checkbox"/> Newly executed (original or copy)		
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation / divisional w/ box 17 completed)		
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).		
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
a. <input type="checkbox"/> Computer Readable Form (CRF)		
b. Specification or Sequence Listing on:		
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
ii. <input type="checkbox"/> Paper		
c. <input type="checkbox"/> Statements verifying identity of above copies		
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:		
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)		of prior application no.:
Prior application information: Examiner: _____ Group Art Unit: _____		
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
18. Amend the specification by inserting before the first line the sentence:		
<input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. _____ Filed on _____		
<input type="checkbox"/> Which was published in English		
<input type="checkbox"/> Which was not published in English		
<input type="checkbox"/> This application claims priority of provisional application Serial No. _____ Filed _____		
19. CORRESPONDENCE ADDRESS		
 22850 (703) 413-3000 FACSIMILE: (703) 413-2220		

Name:	Gregory J. Maier	Registration No.:	25,599
Signature:		Date:	10/12/01
Name:	C. Irvin McClelland Registration Number 21 124	Registration No.:	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Hidekazu KAMON, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: RECORDING/REPRODUCING APPARATUS, AND METHOD OF DETECTING STATE THEREOF

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

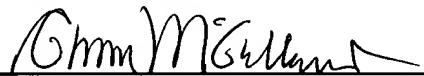
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	12 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	3 - 3 =	0	× \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$740.00
			TOTAL OF ABOVE CALCULATIONS	\$870.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$870.00

Please charge Deposit Account No. 15-0030 in the amount of A duplicate copy of this sheet is enclosed.

A check in the amount of \$870.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030.
A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.Gregory J. Maier
Registration No. 25,599C. Irvin McClelland
Registration Number 21,124Date: 10/12/01**22850**Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 10/00)